

Report of the Interim Committee on Veterans Mental Health and Suicide

October 2022

October 11, 2022

Rob Vescovo, Speaker
House of Representatives
State Capitol Building
Jefferson City, MO 65101


Dear Mister Speaker:

The Interim Committee on Veterans Mental Health and Suicide has met, taken testimony, deliberated and concluded its review of mental health issues and suicide specific to veterans. The below listed committee members are pleased to submit the attached report:


Chair, Representative Dave Griffith



Representative LaDonna Appelbaum



Representative Bill Hardwick

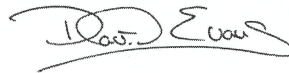


Representative Robert Sauls

Sincerely,
Representative Dave Griffith
Committee Chair



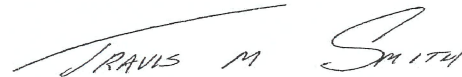
Vice-Chair, Representative Mike Stephens



Representative David Evans



Representative Lane Roberts



Representative Travis Smith

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Introduction

It is the intent of this committee to bring awareness to mental health issues facing veterans and the high rate of suicide among veterans when compared to the civilian population. The committee examined current programs and learned more about new or forthcoming programs with the goal of addressing veterans' mental health and suicide. Additionally, the committee also asked for recommendations about what the State of Missouri can do to help address these issues.

Veterans' mental health and suicide are complex subjects not to be taken lightly. The committee realizes that these issues have been analyzed by numerous individuals and entities and recognizes these issues are multifaceted, with countless factors, outcomes, and proposed solutions. Ultimately, the State of Missouri has a responsibility for, and must play a role in, providing resources in critical areas that address these issues.

Many private and public organizations are working to provide mental health treatment to veterans and to intervene during times of mental health crisis. The committee commends these efforts and asks that these organizations keep an open dialogue with the Missouri House of Representatives to bring recommendations forward that the State of Missouri can act on. The committee also believes that having direct knowledge from providers and the community-at-large can help shape policy and drive resources into productive tools for the benefit of veterans.

One major contributing factor that the committee heard that can lead to veteran suicide was the stigma associated with mental health and seeking treatment. The committee hopes that by bringing awareness to veterans' mental health and suicide it demonstrates that asking for help shows a sense of self-awareness and strength. It takes an incredibly strong person to approach loved ones and/or friends that may be suffering as a result of mental illness. Individual action is immensely important and can be lifesaving.

This committee benefited greatly from numerous individuals that shared incredibly personal stories about how veterans' mental health and suicide directly affected their own lives. These individuals and their experiences intimately shed light on the issues. The committee thanks these individuals for having the strength to come forward, discuss these issues, and share how their lives have been affected with openness.

Summary of Public Testimony

I. July 27th, 2022

[\(Link to video archive here\)](#)

This hearing intended to focus on the mental health part of suicide with program presentations by the Missouri Veterans Commission, Missouri Department of Mental Health and other mental health organizations.

Testimony began with explaining that mental health challenges are not exclusively a veteran's issue, but are more prevalent for those that are associated with the military. Some reasons for the higher prevalence of these challenges amongst the military include deployments and the desire to return home immediately after deployment regardless of whether a service member's experiences on deployment and mental health need to be addressed. It was stated that individuals returning from deployment will sometimes declare that events that occurred while on deployment are not troubling them when in fact the event may be truly troubling them in order to expedite their return rather than go through additional processing that may delay their return home to their families. Also, there is a stigma associated with mental health in the military because members of the military take pride in being able to accomplish tasks given to them. Service members use terms such as "embrace the suck" and "suck it up" to describe the "mission-first" culture of the military. As a result of a mission-oriented culture, seeking help for mental illness can sometimes be viewed as a weakness. Additionally, it was stated that not addressing mental health can lead to relationship and financial issues, homelessness, crime, incarceration, and suicide, leading to significantly higher suicide rates among veterans than non-veteran peer groups.

The Missouri Veterans Commission (MVC) has programs and are in support of programs that are aimed at reducing suicide among veterans. The new 988 Suicide and Crisis Lifeline phone number provides an easier to remember number than the previously longer number, with the MVC being very much in support of this change. Additionally, MVC now has a portal on their website that provides resources available to veterans. Many of these resources are aimed at veteran mental health and homelessness. The portal is constantly updated with new resources available to veterans. MVC has started a "You Are Worth the Battle" Campaign in which they work with the Office of the Lieutenant Governor, Department of Mental Health (DMH), Missouri National Guard, and the Office of the Missouri Military Advocate under the Department of Economic Development. "You Are Worth the Battle" is a social media campaign that focuses on education and awareness for identifying and responding to someone in a mental health crisis.

There are four programs under DMH that are specific to suicide prevention. These programs are the Missouri "Buddy Check 22 Day", "SAVE: suicide prevention training", "Missouri veteran suicide prevention team", and the "prevention advocate program". Missouri "Buddy Check 22 Day" was a result of legislation passed by the General Assembly in 2020 and encourages connectedness among veterans

or service members by checking in on them and seeing how the veteran or service member is doing. “SAVE” training is offered through DMH. This training is free and completed online. It educates members of the public with specific information on how to prevent suicide. The Missouri veteran suicide prevention team is a network of military-connected individuals that are trained and certified by DMH. These individuals travel the state to offer training to community members and organizations such as the American Legion, Disabled Veterans of America, and other veteran service organizations about how to prevent suicide.

The Governor’s Challenge Team, a joint effort between the state, the federal government, and community partners, was also mentioned. The Team has three priority areas: identifying veterans, service members, military connected families, and screen for risk of suicide; exploring the creation of military liaisons in state agencies; and increasing lethal means safety and safety planning aimed at decreasing the risk factors that are associated with an increased risk of suicide. The Governor’s Challenge Team is currently an ongoing effort and collaborates in best practices as to how to address these priority areas.

The American Legion has started a new program to address veteran mental health and suicide. The American Legion also promotes connectedness among veterans, checks in on its members, and is attempting to remove the stigma associated with mental health and seeking help.

Signature Psychiatric Hospital testified to their “Valor” program, a 16 bed program in the Kansas City metropolitan area that focuses on active-duty service members, veterans, and first-responders. It is a 28-day program that focuses on mental health, suicide prevention, and prevention of relapse. It was stated that there are significant barriers to treating veterans because they need referrals from the Veterans Administration (VA) in order to treat veterans that are using VA health benefits. This is troublesome considering there can be waitlists for veterans that need treatment.

Finally, the family of a veteran that died by suicide testified on the hardships and emotional ramifications that result from veteran suicide. This veteran was highly decorated and was a father and husband. The family shared details on how many of the previously mentioned factors that affect veterans mental health arose within him. The family has been emotionally devastated as a result of the suicide and their lives have changed forever. The family stated that by speaking about the suicide within their family, they hope to prevent future suicides and they have committed to working to help prevent veteran suicide.

This hearing intended to focus on veteran suicide with presentations by the Missouri Department of Mental Health on their 988 suicide prevention hotline program as well as various non profit organizations who offer life changing resources and experiences, crisis intervention, mental health and substance use treatment, and outreach for veterans.

Testimony began with DMH stating that Missouri is consistently higher than the national average with regards to suicide rates in both the veteran and general populations. It was also stated that the State of Missouri recently updated its suicide prevention plan with a focus on the overall population and certain at-risk populations, which includes the veteran population. DMH stated that they partner with numerous organizations in order to address suicide and that DMH has prevention resource centers. The department has ten such prevention resource centers in the state. These prevention resource centers provide technical assistance and support for substance and suicide prevention throughout the state. The department stated that research shows that suicide rates can be driven by lack of mental health care, ease of access to firearms, isolation, and overall resistance to help in seeking care. The department has received numerous grants recently and the department is utilizing these grants in order to provide resources and create programs to address mental health and suicide prevention training.

The 988 phone number went live the month prior to the hearing meeting date. While 988 is a national initiative, it is up to states to plan and implement 988, as well as integrate it into the larger crisis system of care. The purpose of 988 is to provide an individual in crisis with someone to talk with immediately and to connect the person in crisis to the behavioral health system of care. The State of Missouri has been working on the 988 program for two years prior to the phone number going live. The 988 phone number is the front-end of a larger program that involves but does not necessarily require more expensive care. The goal of the larger program is to have trained mobile teams respond to a crisis, if necessary, within the community that the individual in crisis is a part of. This would allow for individuals experiencing a crisis to have issues resolved in their own community, and would allow for crises to be resolved without hospitalization and law enforcement involvement. Missouri currently has six calls centers that handles 988 hotline calls and one center that handles texts. 988 has a prompt at the beginning of the call that can redirect calls for veterans to individuals that deal specifically with veterans. 988 is confidential and can make follow-up referrals if necessary. The department reported that they are in the process of building behavioral health crisis centers within communities so individuals experiencing a crisis can receive immediate care within their own community. Additionally, DMH is constantly identifying areas in the state, such as rural areas, that have little to no community and mental health resources. It is a priority of the department to identify these areas.

Private entities are also concerned about veterans' mental health and suicide. The Warrior's Journey, healthPERX, and Ohana Homefront Foundation testified as to what resources each of their organizations have to offer veterans. The Warrior's Journey stated that alcohol and drug abuse are key risk factors and these factors are more prevalent in the active-duty community and veteran community. They stated that the military's resiliency training does not necessarily cover emotional and spiritual

resiliency. They find that emotional and spiritual resiliency are important factors to consider when offering treatment for mental health. The Warrior's Journey is an approved vendor through the United States' Department of Defense (DOD) and the VA. They match service members and veterans with individuals that have served in the same branch of service and have similar experiences. These trained individuals then focus on suicide prevention and intervention when necessary. They have provided intervention care to over 1,000 individuals and have not had one individual follow-through with suicide after contacting their organization.

The individual testifying for informational purposes on healthPERX, a company that offers mental health care via an online platform, stated that they know a veteran, who upon returning home, had developed issues with substance abuse and did not receive the help needed from the VA. When this veteran was made aware of healthPERX, the veteran stated that they knew about healthPerx, it would have given him access to critical resources sooner and would have allowed the veteran to change their life for the better, earlier. Also, the veteran stated it could have saved his fellow veterans that have died by suicide. This is because healthPERX offers access to providers on a virtual platform. This allows for services to be offered in underserved areas. Additionally, it overcomes the stigma of receiving mental health treatment by offering a more private delivery of the care needed.

Ohana Homefront Foundation was recently founded because the founders see a need for improvements in veterans' mental health care. Their mission is to build relationships and to have communities understand the challenges faced by veterans. The Foundation educates veterans about holistic treatments, such as motorcycle therapy, that are not necessarily tied to cognitive therapy. The organization is currently looking for peer-to-peer volunteers since they are an all-volunteer nonprofit. The organization is not currently active in Missouri, but are hoping to become active once they have enough volunteers.

Alternative medicine was also discussed during the hearing. It was stated that there are currently on-going FDA-approved studies in the State of Missouri as to whether non-traditional substances can treat mental illnesses. Veterans and military-connected individuals testified that these substances successfully treated a variety of behavioral health issues. These substances are currently illegal to be in possession of in Missouri and these individuals testified to the burdens associated with using such substances, such as leaving the country. It was stated that these substances, while illegal in the State of Missouri, successfully treat mental illnesses and the state should consider legalizing these substances.

Veterans having a sense of community and connectedness was discussed. One veteran testified before the committee about their personal struggles with mental health, factors that led him to a suicide attempt. As a result of his experiences, he has created an organization that focuses on connecting veterans with fellow veterans. His organization has had success with veterans. The organization meets once a week for dinner and offers a dialogue between veterans where these individuals can share their own personal issues.

A current service member testified about his brother, who was also currently serving, who died as a result of suicide. He stated that compiling a list of resources and organizations would be helpful. Additionally, he stated his desire that people would start becoming more willing to talk about mental health.

III. September 14th, 2022

[\(Link to video archive here\)](#)

This hearing intended to focus on resources for veterans and include presentations by organizations who offer housing, healthcare, and advocacy services for veterans.

Testimony began with statements that veterans have a host of external factors that may negatively affect mental health. Some of these factors include a health care system that is not responsive to veterans' needs, individuals that are negative towards veterans, traditional veterans' service organizations not reaching out to younger veterans, cell phones occupying too much attention of users, and the opioid epidemic. It was also stated that providing more meaningful interactions between people and healthy diets can have a very positive impact on veterans. Testimony was offered suggesting that government should provide more regulation in order to promote healthy lifestyles.

Alternative treatment with the use of CBD oils and cannabinoids was discussed by a current company that is in the CBD market. The company stated that individuals can self-medicate with CBD oils for anxiety and other factors. It is important to factor in the quality of CBD products if one were to start considering cannabinoid therapy. It was stated that this alternative treatment is a safer and more natural treatment when compared to other medications.

K9s on the Front Line testified that the use of service dogs is a very effective method of treating mental illnesses. Those that testified on behalf of the organization were veterans that testified about their personal struggles with mental illness after their military service and how service dogs have helped in treating their issues. The program takes shelter dogs, pairs them with veterans, and has the veteran and service dog train together.

The Veterans Administration testified to the committee about its ongoing efforts to prevent suicide and treat mental illness. The VA has an office of mental health and suicide prevention. The office employs a multidisciplinary approach to suicide prevention and mental health. The VA's suicide prevention program was established in 2007 and has been growing since. The VA stated that a veteran having a sense of purpose is important for mental health and a preventive factor for suicide. This sense of purpose can vary greatly between veterans, but it was stated that it is typically tied to having the veteran feel like they are a part of a larger community and have a sense of belonging.

Homelessness is another concern for veterans. Two organizations concerned with veteran homelessness testified to the committee. One organization, Veterans Community Project, is currently addressing homelessness in the Kansas City metropolitan area and plans to expand into the St. Louis metropolitan area soon. This organization has numerous tiny homes located on one campus and offers resources and assistance out of a larger building located on the campus. The second organization, Welcome Home Inc., is located in Columbia and offers emergency housing for veterans as well. Both organizations stated that mental and behavioral health are factors that lead to homelessness. It was also stated that discharge status of veterans is an incredibly important factor when attempting to get resources for veterans. This is because a veteran with an unfavorable discharge status may not be able to legally receive care from the VA. Additionally, it was stated that discharges can be upgraded depending on the service of the veteran, but these discharge upgrades are expensive and very time

consuming for the veteran. Welcome Home Inc. stated that the committee should consider three areas while exploring policy options:

1. Reducing the red tape requirements for funding of smaller agencies that are trying to give services to veterans;
2. Continuing to fund rural health, mental health, and treatment services. Rural areas are of significant importance because not every veteran can make it to an urban area in order to receive treatment at a VA hospital; and
3. Continuing to foster affordable housing. Currently in Columbia, there is a higher need than supply in Columbia. Landlords in Columbia can screen out veterans that have evictions or criminal records and have students rent instead.

Committee Recommendations

1. The committee hereby recommends the General Assembly create an item in the budget for the funding and operations of the 988 Suicide and Crisis Hotline at an amount of not less than \$27 million.
2. The committee hereby recommends the Missouri Department of Mental Health create a prominent link on the department's website to a portal that provides information and can direct veterans, service members, and their families to resources and programs available to these individuals concerning mental health and suicide prevention. Also, such portal should be regularly maintained by the department in order to be kept current with new resources and programs available to veterans, service members, and their families concerning mental health and suicide prevention.

- I. July 27, 2022 Hearing
 - A. Attendance: Chair Griffith, Vice-Chair Stephens, Representative Appelbaum, Representative Evans, Representative Roberts, and Representative Smith
 - B. Location: Missouri State Capitol: House Hearing Room 7
 - C. Testimony Given From:
 - 1. Edward Greenslit
 - 2. Gary Grigsby
 - 3. Bailey Blackmann
 - 4. Devin Norton
 - 5. John Sabala
 - 6. Kelly Brown
 - 7. Paul Kirchhoff
- II. August 31, 2022 Hearing
 - A. Attendance: Chair Griffith, Vice-Chair Stephens, Representative Evans, and Representative Hardwick
 - B. Location: Missouri State Capitol: House Hearing Room 7
 - C. Testimony Given From:
 - 1. Blake Leitch
 - 2. Kevin Weaver
 - 3. Tim Jensen
 - 4. Carl Shepard
 - 5. Casey C. Muckler
 - 6. Elaine Brewer
 - 7. John L. Morlock
 - 8. Mark Chick
 - 9. Michael J. Brown
 - 10. Natalie Cook
 - 11. Nicole Marie Pingel
 - 12. Rahul Kapur
 - 13. Stacey Williams
 - 14. Tim Remole
 - 15. Timothy Sullivan
 - 16. William Wisner
- III. September 14, 2022 Hearing

- A. Attendance: Chair Griffith, Vice-Chair Stephens, Representative Evans, Representative Hardwick, Representative Roberts, Representative Sauls, Representative Smith, and Representative Clemens (Ex Officio)
- B. Location: Jefferson City, Missouri, State Capitol-House Hearing Room 1
- C. Testimony Given From:
 - 1. Arnie Dienoff
 - 2. Bryan Meyer
 - 3. Chad Collins
 - 4. Charles M. Pritchard
 - 5. Jacob Murphy
 - 6. Jason Howe
 - 7. Jonathan Jedlow
 - 8. Jonathan Stone
 - 9. Katie McDannald
 - 10. Lynn Reasons
 - 11. Randy Gardner
 - 12. Reginald Gatewood
 - 13. Shawn Lee

Appendix B: Testimony Submitted Online



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER:		DATE: 7/27/2022	
COMMITTEE: Interim Committee on Veterans Mental Health and Suicide			
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: EDWARD GREENSLIT		PHONE NUMBER: 573-694-7549	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS: 305 TYLER ST			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65101
EMAIL: sarg0627@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 7/27/2022 7:47 PM	

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

I am a US Army veteran that has lived in Missouri for 22 years and in 2017 I was suicidal. I worked for Missouri Division of Workforce Development at that time and had for 14 years. I was asked to do things unethical and illegal I was made fun of because of my hearing loss and my views on not manipulating data and the agency itself violating its own policy. The people who should have helped didn't, no final investigations into my complaints, and per federal law the agency never reported my concerns. Not one elected official at the state or federal level did any kind of investigation.

Management enjoyed ignoring me and when I got frustrated they wrote me up or disciplined me selectively. I couldn't sleep or slept all the time, I was depressed, had extreme anxiety and was ready to shoot myself to just make it stop, even considered shooting myself i. The dunklin building to get attention brought to my concerns.

This agency did everything it could do to dismantle the veterans program and used veteran money like a piggy bank.

It is often hard for us to integrate back into the civilian world because the environment is different, it is less structured, less following regulations and more often willing to break the rules or just ignore them. We often can't depend on the ones to the right and left of us because they don't understand our concerns, and why we feel the way we do.

People say (including the state agencies) that they support veterans but often they don't. When I started at the state a majority of the management in the central office was veterans and was a pretty good place to be. When I left in 2018 only one veteran remained in management at central office and Mardy Leather demoted him.

Want to help us? Take us seriously, support us and actually provide the help you say you will, and do it without all the hoops your agency heads and contractors add. We need less hoops and more action.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER:		DATE: 9/14/2022	
COMMITTEE: Interim Committee on Veterans Mental Health and Suicide			
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input checked="" type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: ARNIE C. "HONEST-ABE" DIENOFF-STATE PUBLIC ADVOCAT		PHONE NUMBER: 314-440-9000	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS: P.O. BOX #1535			
CITY: O' FALLON		STATE: MO	ZIP: 63366
EMAIL: arniedienoff@yahoo.com	ATTENDANCE: Written		SUBMIT DATE: 9/6/2022 11:48 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			

I Request that the Committee put Investigative Resources and Fact-Finding for ALL Six (6) Million Missourians and not a Select Few. All Missourians are Equally Important and deserve Prevention Services and Programs that Abolishes Suicide and Makes Missourians feel Cared about as Human-Beings. This is a State-Wide Issue over all of Our Communities and Not just Military Veterans of the Armed Forces.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER:		DATE: 9/14/2022	
COMMITTEE: Interim Committee on Veterans Mental Health and Suicide			
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input checked="" type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
BUSINESS/ORGANIZATION:			
WITNESS NAME: JACOB MURPHY		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME: UNITE US		TITLE: REGIONAL VICE PRESIDENT, SALES	
ADDRESS:			
CITY: NEW YORK CITY		STATE: NY	ZIP: 10007
EMAIL: jake.murphy@uniteus.com	ATTENDANCE: Written		SUBMIT DATE: 9/12/2022 3:06 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			

Dear Missouri House Interim Committee on Veterans Mental Health and Suicide Members, Unite Us appreciates the opportunity to share written testimony on Veterans Mental Health and Suicide Prevention. Our testimony demonstrates our deep understanding of the veteran population, their needs and how to better connect veterans to needed social services that can impact their mental and physical health. Unite Us encourages the Committee members to consider the benefits of a social care network for Missouri veterans.

Unite Us was founded by veterans for veterans in 2013. Across the country, we help service members find needed care by creating accountable, cross-sector networks of healthcare providers, social care providers and government agencies. Our secure bi-directional referral platform tracks referral and service outcomes, helping to ensure that veterans get the care they need in their communities without undue delay.

Our social risk scoring system indicates that veterans in Missouri are more socially vulnerable than veterans across the country, meaning that MO veterans are at higher risk for poor health outcomes because of their social determinants of health- where they live, work and play. In fact, compared to all US veterans, Missouri veterans have higher rates of loneliness (by 5%), higher rates of uninsured (by 5%), more financial insecurity (by 3%), more food insecurity (by 2%), and poorer housing quality (3%). This social vulnerability can impact mental health and suicide risk.

The Unite Us Team aims to reduce veteran suicide by powering social care infrastructure, i.e. technology and networks, that identifies the social care needs of veterans who present risk factors for suicide, connects those veterans in services, and ensures those veterans receive services that meet their social care need(s). Our networks foster a 'no wrong door' approach to service access. This approach means that a veteran can be connected to needed services through any community partner on the network, including their veteran service organization, the pastor at their church, their physician's office, the local employment office, through a website form, a phone call, and more. This saves everyone time, increases efficiency, and allows a network to help more people, no matter their communication preference.

We understand that status quo approaches aren't enough. There needs to be real-time response, meaningful data to inform decisions, and the ability to measure outcomes to confirm that veterans are receiving the services they deserve and need. To ensure these outcomes, Unite Us offers a true end-to-end solution including:

An intuitive technology platform that supports meaningful collaboration, community-wide care coordination, and secure data-sharing.

The ability to actively track every veteran's longitudinal care journey including each referral service

episode, interaction, and outcome.

A flexible, scalable, and sustainable infrastructure that integrates with existing workflows and scales with innovative delivery of social services.

Real-time, actionable metrics and teams focused on individuals and outcomes enabling the network to proactively address the complex needs of the most vulnerable veterans and prove impact.

Unite Us's experience helping veterans transverses the entire country. To date, we have served 438,670 veterans nationwide and over 16,000 veterans in Missouri. Other veteran-focused examples of Unite Us's work includes:

Unite Georgia/VECTR Center: The Georgia Veterans Education Career Transition Resource (VECTR) Center uses the Unite Us Platform through the Unite Georgia network to connect Veterans and their families to health, social, childcare, and workforce development support which removes the burden of finding resources off of those in need. During a one year pilot project, the network coordinated over 2,122 electronic referrals, resulting in over 3,000 service episodes supporting Veterans and their families. As referral numbers picked up, so did accountability. Time to case closure from receiving organizations dropped from an average of 9.3 days in 2020 to an average of 2.8 days in 2021. Of the resources requested by job-seeking Veterans, the highest demand was for state-issued income support. This highlighted the ongoing need to support Veterans as they seek and strive to maintain employment. VECTR recently received additional funding to continue this important program.

America Serves: Unite Us partners with AmericaServes to address the needs of military connected members and their families. Ameriserves launched in 2015 and has continued to expand since then.

Currently the AmericaServes network serves portions of Maryland, New York, North Carolina, Pennsylvania, Rhode Island, South Carolina, Texas, and Washington. As of June 2021, AmericaServes had helped over 43,000 clients with over 100,000 requests. Of the service requests through AmericaServes, the top five needs in order are: housing and shelter, employment, benefits navigation, income support, and clothing and household goods.

Los Angeles County Department of Mental Health Veteran Peer Access Network (VPAN): Unite Us partners with Southern California Grantmakers (SCG) on behalf of the Los Angeles County Department of Mental Health Veteran Peer Access Network (VPAN), which prioritizes hiring Veterans as "battle buddies" and systems navigators to connect their brothers and sisters in need to helpful resources. This partnership demonstrates how Unite Us seeks to serve each individual through our community-wide infrastructure that connects health, human, and social service providers on a single network. The Veteran Peer Access Network launched in January of 2021. In 2021, they used Unite Us to positively resolve 618 housing and shelter service episodes, 349 employment service episodes, and 197 mental/behavioral health service episodes, and brought more than 2,000 Veterans and family members into the network.

Unite Us looks forward to continued work in Missouri. Our growing Unite Missouri network serves all Missourians with over 360 network partners and over 770 programs and counting. The network will be state-wide by the end of the year, connecting Missouri residents to social care in every county. We look forward to opportunities to work with the State to bring additional investment and focus on veteran partnerships to lead Missouri veterans to greater self sufficiency and improved mental health.

Please contact our team with any questions. We look forward to continued dialogue with you on these important issues and hope to have the opportunity to meet with the Committee soon.

Sincerely,

Captain Jacob L. Murphy

Army Officer 2006-2013

Army Cadet 2002-2006

Unite Us Regional Vice President, Sales

jake.murphy@uniteus.com

Appendix C: Resource Websites

1. Missouri Veterans Commission:

www.veteranbenefits.mo.gov/

2. Welcome Home:
<https://www.welcomeveterans.org/>
3. K9s on the Front Line:
<https://k9sonthefrontline.org/>
4. U.S. Department of Veterans Affairs Mental Health Care:
<https://www.va.gov/columbia-missouri-health-care/health-services/mental-health-care/>
5. U.S. Department of Veterans Affairs Harry S Truman VA Hospital
<https://www.va.gov/columbia-missouri-health-care/locations/harry-s-truman-memorial-veterans-hospital/>
6. Find a U.S. Department of Veterans Affairs Facility:
<https://www.va.gov/find-locations>
7. Veterans Community Project:
<https://www.veteranscommunityproject.org/vcp-kansascity>
8. Missouri Department of Mental Health 988 Suicide & Crisis LifeLine:
<https://dmh.mo.gov/behavioral-health/988-suicide-and-crisis-lifeline>
9. Heroes Outreach Program:
<https://www.heroesoutreachprogram.org/>
10. The Ohana Homefront Foundation:
<https://www.ohanahomefront.org/>
11. The Warrior's Journey:
<https://thewarriorsjourney.org/>
12. Missouri Department of Mental Health Resources for Service Members, Veterans & their Families:
<https://dmh.mo.gov/veterans>